Karnataka Belgaum

Rapid Household Survey -- RCH Project 1998

Sponsored by the Ministry of Health and Family Welfare
Government of India
New Delhi

Population Research Centre
Institute for Social and Economic Change
Bangalore

June, 1999

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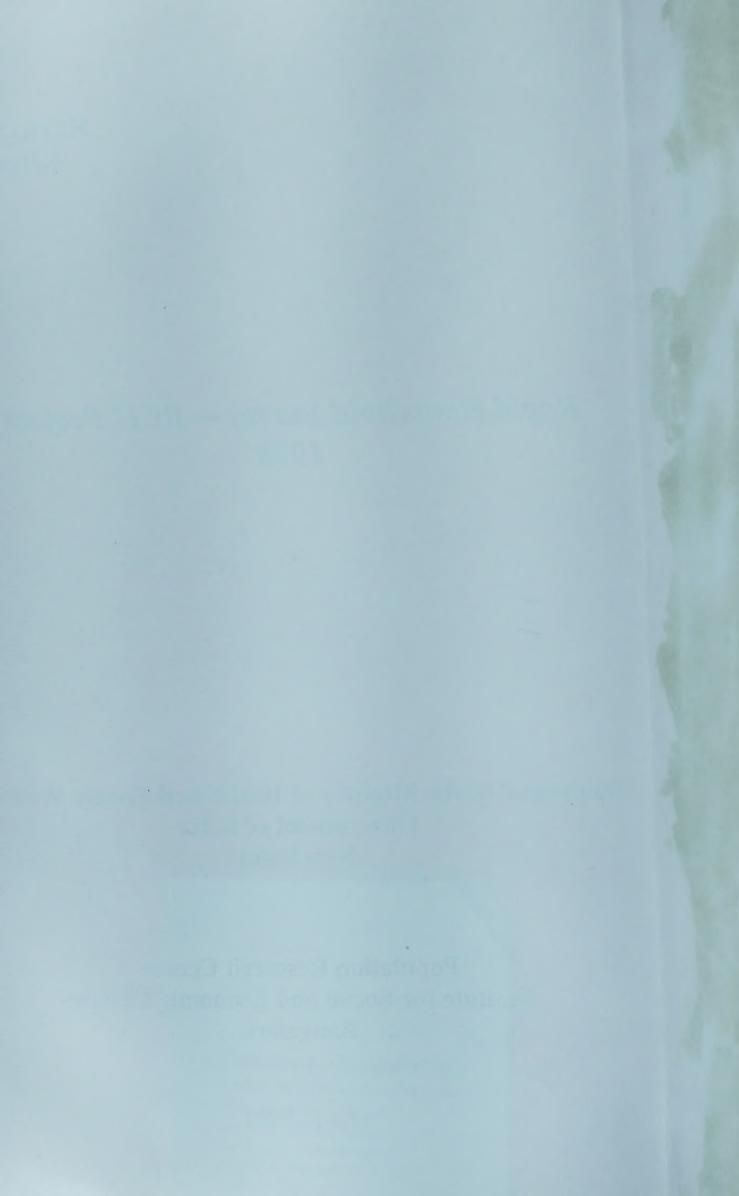
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KARNATAKA Belgaum District 1998

> R Mutharayappa K N M Raju and K S Umamani

Population Research Centre Institute for Social and Economic Change Bangalore

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Preface and Acknowledgments

The Reproductive and Child Health interventions being implemented by Government of India are expected to provide quality services and achieve multiple objectives. There has been a positive paradigm shift from Method-Mix-Target based activity to Client-Centered-Demand Driven quality services. The Government of India desires to re-orient the programme and strengthen the services at the out-reach level. The new approach requires decentralization of planning, monitoring and evaluation of the services at the basic nucleus level which is district.

Keeping in view with their objectives, Government of India (GOI) desired to generate district level data on utilization of the services provided by Government health facilities and people's perception on quality of these services. In order to achieve this goal, GOI decided to undertake Rapid Household Survey (RHS) in all the districts in the country, so that the progress of RCH programme can be monitored. Approximately 50 per cent of the districts are covered in the first year of the project. The survey was conducted by various Regional Agencies (RAs) and coordinated by International Institute for Population Sciences (IIPS), Mumbai. The financial assistance for RHS was provided by the World Bank.

In a district, 1100 households and all eligible women (age 15-44) available in these households were covered. The data was collected by using uniform questionnaires, sample designs and field procedures. The survey thus, provided comparable data for all the districts (covered in a year) of the country. Rapid Household Survey (RHS) is the first of its kind in the country ever conducted to generate basic data at the level of a district.

We do hope and believe that the data generated through the survey will meet the requirements of the Programme Administrators and the Policy Makers for making effective interventions for providing quality services and achieving multiple objectives

The RHS could not have been successfully complete support from innumerable sources at various stages of the prossible to acknowledge everyone involved in the survey, individuals deserve special mention.

ut cooperation and Although, it is not organizations and

The first and the foremost organization to whom we wi the Ministry of Health and Family Welfare (MoHF opportunity to work for a project of national importance. due to Shri Y.N. Chaturvedi, Secretary (Family Welfare) for I and valuable support to the project. We are also thankful Director of MoHFW and Dr. Padam Singh, Addl. DDG of IC: We are also thankful to Rail India Technical and Economic Ser r giving us are pecial thanks are ly initiative, advice in P.K.Saha, Chief their contribution d.

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The International Institute for Population Sciences valuable guidance and strong support to the survey which is Our special thanks and gratitude to Prof. K.B. Pathak, former Kulkarni, Officiating Director, IIPS for their timely advice an stages of the survey. We also acknowledge the contributions of Prof. Faujdar Ram, Dr. D. Radha Devi and Dr. Sulabha Parasur Project at IIPS, Mumbai.

Mumbai provided lly acknowledged or and Dr. Sumati ble guidance at all Shekhar Mukherji Coordinators of the

We would like to express our sincere thanks Dr. P.V.Shenoi and his successor Dr. M.Govinda Rao for the operation in carrying out Rapid Household Surveys in all the also due to Prof. P.H. Rayappa for going through the draft repetite co-operation received from the Registrar Dr. M.Venka

former Director ole advice and coates. Thanks are We acknowledge by and his staff Accounts Officer Mr. R.Narayanan and his staff, and Estate and Transport-in-charge Mr. B.S.Krishna Murthy at the Institute for Social and Economic Change. We are thankful to all the respondents in all the three states for sparing their valuable time and for giving us the required information with patience.

We do hope that the Ministry of Health and Family Welfare, Government of India, will find the results of the Survey useful in achieving the set objectives of the Rapid Household Survey. Round the clock efforts of my colleagues at the Population Research Centre, will be truly rewarded if the project is able to effectively highlight/reflect the Reproductive and Child Health needs of the community.

K N M Raju Professor and Head, PRC Project Director, RCH

June 1999

Salient Findings

Belgaum district is located in northern part of Karn. states' reorganisation, it was in Bombay State. The population 1981-91 period. The district is predominantly rural (77 per moderate literacy rate of 53.0 per cent.

ate and before the h rate is 1.8 during and characterized by

The survey covered 99 per cent of the selected houseligible women.

and 85 per cent of

The mean age at marriage estimated from the survey of girls and 23.9 years for boys - it was higher in urban areas for children ever born to women in 15-44 years age group is 2.8 between rural and urban areas. The pregnancy wastage is workwhich 3.7 per cent were abortions (both spontaneous and industrial)

aled 17.2 years for he mean number of rdly any difference to be 6.0 per cent of

Family Planning: Knowledge regarding female st universal while over half of the eligible women knew about co of the women had opted for female sterilisation and less than Surprisingly contraception in urban areas was considerably (59.8 per cent and 62.5 per cent, respectively). Another contraceptive practice observed in the district is the fact that women with fewer children go for sterilisation. For example 72 per cent of women in 25-29 year age group were sterilised 2 children it was 62 per cent.

About 59 per cent ent other methods.

nan in rural areas ant feature of the and more younger a reveal that about hose who had only

Ante-Natal Care: The survey revealed that about women had received ante-natal services (3 check-ups, 2TT in the total safe deliveries conducted in the district constituted 68

cent of the eligible and IFA tablets).

Pregnancy Complications: Complications related to for 44 per cent and related to deliveries 17.7 per cent. Side

mancies accounted for pill users was

found to be very high (100.0 per cent) and 17 per cent for acceptors of female sterilisation. Reproductive tract infection was found to be very low (2.5 per cent) and sexually transmitted infection was 2.2 per cent. Awareness regarding RTI and STI was very low (2.0 per cent and 3.0 per cent, respectively), but awareness about HIV (AIDS) was very high (65 per cent).

Utilization of Government Health Care Services: Ante-natal care, complications of pregnancy and delivery, contraceptive services are mainly provided by the government health care services that ranged between 17 per cent to 44 per cent. Immunisation of children was done most by government sources (64.8 per cent), while private health care services played a major role in treating pneumonia and diarrhoea (over 80 per cent).

Other Health Care: 65 per cent of all children had received complete protection against major childhood diseases (BCG, 3 DPT, 3 Polio and measles). Over one-third of the infants had received colostrum after birth and over 87 per cent children were breast-fed exclusively for four months.

Rapid Household Survey, Reproductive and Child Health KEY INDICATORS

STATE:

KARNATAKA

DISTRICT: BELGAUM

No.	KEY INDICATORS			
1	Population data, 1991			
	A) Total Population (in thousand)			3583
	B) Percent Urban			23
	C) Percent Scheduled Caste			11.
	D) Population growth rate (1981-91) (Annual exponential)			1.
2	Sample Population	Total	Rural	Urba
	A) Number of households surveyed	1090	832	2
	B) Total population covered in survey			
	i) Male	3037	2364	6
	ii) Female	2879	2237	6
	iii) Total	5916	4601	13
,	C) Number of men (age 20-54 years) interviewed	270	218	
	D) Number of Eligible Women age 15-44			
	i) Total	1044	814	2.
	ii) Interviewed	899	700	10
3	Background characteristics of eligible women interviewed			
	A) Percent Hindu	70.7	70.1	0.5
	B) Percent Muslims	79.7	78.1	85
	C) Percent Scheduled Caste	8.3	8.2	8
	D) Percent Scheduled Tribe	10.7	10.8	1 C
	E) Percent Other Backward Classes	1.2	1.4	C
4	Marriage Age	21.1	20.8	22
	A) Mean age at first cohabitation for Eligible Women interviewed	16.0	15.7	17
	B) Percent of boys married at age less than 21 (for marriages since 1.1.1995)	21.5	25.6	. 3
	C) Percent of girls married at age less than 18 (for marriages since 1.1.1995)	55.8	60.4	411

No.		KEY INDICATORS	Total	Rural	Urban
5	Fert	ility			Cibali
	A)	Mean number of children ever born to eligible women age 40-44	4.0	4.2	3.6
	B)	For period 1.1.1995 to 30.6.1998			
		a) Average Crude Birth Rate	24.0	24.4	22.8
		b) Average General Marital	136.4	138.1	130.2
		Fertility Rate (GMFR)		150.1	130.2
		c) Percent distribution of total births by order:			
		i) 1	32.4	31.9	34.3
		ii) 2	30.7	30.1	33.3
		iii) 3 and above	36.7	37.9	32.3
6	Mor	tality (Number)			
	A)	Infant deaths among children born during 1.1.95 to 30.6.97)	8	5	3
	B)	Neonotal deaths among children born during 1.1.95 to 30.6.98 due to tetanus	3	3	0
	C)	Total maternal deaths since 1.1.95	4	4	0
7	Mor	bidity: Number of cases reported			
	A)	Leprosy	3	2	1
	B)	Malaria (3 months prior to survey)	102	88	14
	C)	Tuberculosis	6	3	3
8	Kno	wledge of family planning			
	A)	Percent of eligible women:			
		i) knowing all modern methods	40.4	35.8	56.7
		ii) knowing any modern spacing method	70.9	67.0	84.9
		iii) knowing any modern method	99.0	98.7	100.0
		iv) knowing any method	99.0	98.7	100.0
	B)	Percent of eligible women/their husbands			
		i) Currently using any method	61.8	62.4	59.8
		ii) Female sterilisation	58.5	59.8	53.7
		iii) Male sterilisation	0.6	0.4	1.5
		iv) IUD	1.3	1.1	2.0
		v) Pills	0.3	0.2	0.5
		vi) Condom	0.7	0.5	1.5
		vii) Any traditional method	0.2	0.1	0.5
	C)	Percent of eligible women having unmet need for	6.0	4.6	7.5
		i) limiting	5.2	4.5	7.5
		ii) spacing	24.9 30 1	25.1	31.6
		iii) total		Also - I	

No.		KEY INDICATORS	Total	Rural	Urba
9	Matern	ial Health Care			
		Percent of eligible women with live/still births ince 1.1.95	33.8	34.0	33.
	A) A	NC check-up			
	i)	who had ANC check-up	91.7	91.1	93.
	ii) who had 3 or more check-up	78.2	78.1	78.
	iii	i) who had ANC check-up at home	43.4	47.8	25.0
	B) T.	T. injection during pregnancy			
	i)	who had none	15.4	17.2	9.0
	ii)	who had one	11.5	11.3	12.1
	iii) who had two or more	72.7	71.0	78.7
	C) IF.	A tablets during pregnancy:			
	i)	who were given IFA tablets	62.5	(5.5)	
	ii)	who consumed one IFA tablet regularly	27.3	65.5	51.5
	iii)	who consumed two IFA tablets regularly	30.2	26.8 33.1	28.7 19.7
	D) Ins	titutional delivery			
	i)	total	50.6		
	ii)	government	50.6	46.6	65.1
	iii)	private	33.7	37.8	23.2
			66.2	62.1	76.7
E	E) Del Do	livery at home and attended by ctor/Nurse/TBA	36.6	35.3	43.4
F	Total	al safe delivery (D + E)	68.6	65.4	80.2
G	i) Visi	ited by ANM within two weeks of delivery:	23.0	22.6	24.2

	KEY INDICATORS	Total	Rural	Urban
Child	Care			
A)	Percent of children age 0-4 months on exclusive			
	breast milk (Relates to the youngest child born since			
	1.1.1995)	87.5	89.4	80.0
B)	Percent of children who got colostrum (Relates to	39.4	35.0	56.0
D)	the youngest child born since 1.1.1995)	37.1	33.0	
C)	Percent of children age 12-36 months who received			
C)	(Relates to the youngest child born since 1.1.1995)	90.6	90.2	92.3
	i) BCG	70.0	70.2	72.3
	ii) DPT	77.5	78.2	75.0
	a) Three injections	16.5	16.3	17.3
	b) No injection	10.5	10.5	
	iii) Polio	85.5	86.9	80.7
	a) Three doses	7.6		13.4
	b) No dose	72.4	72.8	71.1
	iv) Measles			
	v) Complete immunisation (BCG, 3DPT,	64.8	64.6	65.3
	3Polio and measles)			
	vi) At least one dose of Vitamin A	46.9	50.4	34.5
D)	Percentage of babies weighed and babies below			
0)	2.5kg	42.1	38.2	56.1
	Percent of babies weighed	190		16.0
	ii) Percent below 2.5 kg. Out of babies weight	d		
E)	Percent of eligible women whose children (born			
E)	after 1.1.95) had diarrhoea and who were treated			
	with ORS:	11.9	9 11.2	2 14.2
	i) had diarrhoea	17.		2 11.1
	ii) treated with ORS			
1.	Percent of eligible women whose children (born			
F)	after 1 1 95) had breathing problines and treates	12	6 13.	8 12.7
	percent who had breathing problem	13.	13.	12.7
	Becaut of mothers of children with	15.	7 17.	0 10.0
	breathing problem who got their children	13.		
	treated by ANM/Govt. facility			

		KEY INDICATORS	Total	Rural	Urba
No.	Donr	oductive Morbidity			
11	A)	Percent of eligible women who had their last			
	<i>(14)</i>	pregnancy since 1.1.95, having			
		a. Abortion complications	0.0	0.0	C.
		b. Pregnancy complications	44.0	43.2	46
		c. Delivery complications	17.7	15.5	25
		d. Post-delivery complications	30.2	29.8	31
	B)	Percent of eligible women having			
		a. Contraceptive side effects			
		i) Female sterilisation	17.0	18.3	11
		ii) IUD	16.7	12.5	25
		iii) Pills	100.0	0.0	100
		b. Any symptom of reproductive tract infection	11.1	11.6	9
	C)	Percent of males having any symptom of reproductive tract infection	0.0	0.0	0
	D)	Percent of household in which adolescent girls were suffering from Anaemia	6.5	3.8	11
12.	Awai	reness on RCH			
	A)	Percent of eligible women (who had their last live birth/still birth since 1.1.95) aware of:			
		a) Pregnancy complications	69.0	68.9	69
		b) Treatment/practices to be followed in	89.1	87.0	96
		diarrhoea episodes	07.1	07.0	,,,
		c) Danger signs of Pneumonia	17.3	16.8	19
	B)	Percent of eligible women who were aware of:			
		a) Reproductive Tract Infection (RTI)	2.0	1.7	2
		b) Sexually Transmitted Infection (STI)	3.0	2.4	3
		c) HIV (AIDS)	65.0	62.5	73
	C)	Percent males ago 20-54 having knowledge of:		02.5	, , ,
	<i>-</i> ,	a) Reproductive Tract Infection (RTI)			
		b) Sexually Transmitted Infection (STI)	2.5	3.2	0
		c) HIV (AIDS)	2.2	2.7	0
13.	Home	e Visit by Health Worker	84.4	82.5	92
	A)	Percent of rural households visited by ANM/Health			
		Worker three months prior to survey date	36.4	36.4	N.A
	B)	Percent of households where ANM counseled unmarried adolescent girls	22.5	22.5	N.Z
	(C)	Percent of households where ANM distributed IFA tablets to unmarried adolescent girls	0.0	0.0	N.A

No.		KEY INDICATORS	Total	Rural	Urba
14	Utili	isation of Health Services	rotar	Rurai	Urba
	A)	Percent induced abortion of last pregnancy since 1.1.95 by a. Doctors b. Nurses c. Others	0.0	0.0 100.0	0
	B)	Percent of eligible women who sought treatment for complications during i) Pregnancy	0.0	0.0	0.
		ii) Post-delivery period	78.3	75.7	87.
	C)	Percent of Eligible Women who sought treatment for side effects/health problems due to the use of i) Female sterilisation	76.0	76.0	76.
		ii) IUD	10.2	11.4	5.
		iii) Pills	8.3	12.5	0.
		,	0.0	0.0	0.
	D)	Percent of respondents with RTI who sought treatment			
		i) Males	0.0	0.0	0.
		ii) Females	55.0	54.2	59.

CHAPTER 1 INTRODUCTION

1.1 Background and Objectives of the Survey

The Reproductive and Child Health (RCH) interventions that are being implemented by Government of India (GOI) are expected to provide quality services and achieve multiple objectives. There has been a positive paradigm shift from Method-Mix-Target based activity to client-centered-demand driven quality services. Attempt is being made by GOI not only to re-orient the programme and service providers attitude at grassroot level but also to strengthen the services at outreach level.

The new approach requires decentralization of planning, monitoring and evaluation of the services. Under such objectives, GOI has been interested to generate district level data other than service statistics on utilization of the services provided by government health facilities and also people's perceptions on quality of services. Therefore, it was decided to undertake rapid household surveys for all the districts in the country. About 50 per cent of the districts are covered in 1998.

The main focus of the rapid household survey were on the following aspects:

- 1. Coverage of ANC and immunisation services
- 2. Proportion of safe deliveries
- 3. Contraceptive prevalence rate
- 4. Unmet need for family planning
- 5. Awareness about RTI/STI and HIV/AIDS
- 6. Utilization of Health Services and user's satisfaction.

1.2 About District

Belgaum is located in the Northern part of Karnataka State. It was in Bombay State till the states' reorganisation in 1956. According to 1991 census the district had a population of 35,83,606 persons and grew at the rate of 1.84 per cent during 1981-91.

There were 954 women per 1000 males in the district. The population belonging to Scheduled Castes and Scheduled Tribes constituted 13.7 per cent of the total population in the district. About 67 per cent of males and 39 per cent of females were returned as literate in 1991. Population living in urban areas constituted 23.5 per cent in the district.

1.3 Survey design and sample size

In the first year of the RHS, nearly 50 per cent of all the districts in India were selected with random start from either first or second district and then alternative districts were selected. Districts in a state were alphabetically arranged before selection. With this procedure, 252 districts were selected. In the selected districts 50 Primary Sampling Units (PSUs, Villages/Wards) were selected adopting probability proportion to size (PPS) sampling. The village/ward level population was taken as per 1991 census. The sample size for RHS-RCH was fixed at 1000 households i.e. 20 households from each PSU. In order to take care of non-response due to various reasons, over sampling of 10 per cent was done. In other words, 22 households from each PSU were selected following circular systematic random sampling procedure.

1.4 House-listing

House-listing in each of the selected Primary Sample Units (PSU-village/urban ward) is an important activity to select the sample households. IIPS has provided an elaborate procedure to be followed for house-listing which is strictly followed in letter and spirit. It includes:

Listing of every structure in the village/urban ward/block, dwelling units in each structure and other structures like school, shop, cattle shed, dispensary etc., with numbers. Then each dwelling unit is given a separate number. The list of all the households in each Primary Sample Unit forms the sampling frame. The first household is selected by using a random number and other households are selected by employing systematic circular sampling procedure.

All the households in the villages having population less than 1500 have been mapped and listed. A block has been selected for listing and mapping of villages having more than 1500 population. In urban areas a census enumeration block (CEB) has been selected from the selected ward and the notional map was copied. After the identification of the CEB in the city/town, house-listing and mapping have been carried out. From the house-list, the required number of households have been randomly selected. (Table 1.1) and (Table 1.7).

Table 1.1. Basic Demographic Indicators from 1991 census in Belgaum District of Karnataka state

Indicators	1991
Population (in thousands)	3583.6
Annual exponential growth rate (1981-91) (per cent)	1.84
Population density (per Sq Km)	267.1
Per cent of Urban Population	23.5
Sex Ratio (Females per 1000 Males)	954.0
Currently married women age 15-44 (couples) per 1000 population	177.1
Per cent of population	
Scheduled Caste	11.36
Scheduled Tribe	2.32
Others	86.33
Per cent of literate population age 7 +	
Males	66.65
Females	38.69
Persons	53.00

1.5 Questionnaires

Data have been collected through a structured questionnaire. Two types of questionnaire have been designed for each selected household, one eliciting household

information, and the other, eliciting information on women. While the information about the household is collected from any adult member (age 20 and above), information about eligible woman is collected from each currently married woman, age 15-44.

Household questionnaire consists of two sections. The first section elicits information on household characteristics such as number of male and female members in the household, number of eligible women for woman questionnaire, religion, caste, source of drinking water, type of house construction, detailed information on each birth since January, 1995, incidence of maternal deaths since January, 1995, age at marriage of males and females married since January, 1995, prevalence of malaria since three months preceding the survey date, prevalence of TB and leprosy, and supply of Iron and Folic Acid tablets to un-married and anaemic girls age 15-19. This information is collected from any adult member in the household. Section 2 specifically aims at collecting information on general awareness about Reproductive Tract Infection (RTI), Sexually Transmitted Infection (STI) and HIV (AIDS) of any male member, age 20-54, in the household.

Woman questionnaire consists of 6 sections. Data on general characteristics like current age, effective marriage age, number of live births, living children and pregnancy wastage (still births, induced abortions and spontaneous abortions) are collected in section 1; data on ante-natal, natal and post natal care are collected in section 2; on immunization and child care for the last and last but one child born since January, 1998 are collected in section 3; on contraception are collected in section 4; section 5 deals with the assessment of quality of government health services and client satisfaction; and section 6 elicits information on Awareness about RTI, STI and HIV (AIDS).

Quality of data depends on many factors. Of them, questionnaire design, training of field staff and supervision of data collection are vital. These aspects have been taken into account in the survey.

The questionnaire is designed for minimum number of errors that occur while collecting data. Most questions have been designed with clarity and there is no scope for

ambiguity. Questions are pre-coded, and skips and filters have also been provided for easy flow of data collection.

Further, the quality of data has been ensured through intensive training of field staff. Field staff were trained (investigators, supervisors and editors) on the methods of data collection through classroom lectures and mock interviews. They were given 10 days training in local language and each question was explained in detail along with Training Manual during the training sessions. All the technical terms have been explained thoroughly until every one of them understood well. Special lectures from experts in the fields of reproduction, immunization, communicable diseases, reproductive tract infection, sexually transmitted infection and HIV (AIDS) have been organized during the training, thus, fully exposing them to the topics under study. This has enhanced their understanding of questions better and has increased their ability in eliciting information even from an illiterate and ignorant respondent. Also, they were made to conduct mock interviews in the class room. They were also taken to villages and urban blocks for field interviewing. Training sessions were conducted by the staff of the Population Research Center at the Institute for Social and Economic Change (Bangalore) and the International Institute for Population Sciences (Mumbai). Each investigator has been provided with an Investigator's Manual and the team supervisor with a Supervisor's, Editor's and Sampling manuals.

In addition, data have been checked and edited right in the field by the team supervisor. Surprise checks (10 per cent of the total sample) have been made by the staff of the Population Research Centre at the Institute for Social and Economic Change. Research officers of the International Institute for Population Studies were also present throughout the field operations.

1.6 Recruitment, Training and Fieldwork

Educational qualification of field staff, their experience in collecting data and their commitment to the job are important contributing factors in obtaining quality data. All team supervisors have minimum post-graduate degree and some of them have completed M Phil in social sciences. More than 90 per cent of all investigators are post-

graduates and the rest have completed graduation. All have fairly good knowledge of English and the local language, Kannada. In addition, many are able to conduct interviews in Telugu, Tamil, Malayalam, Marathi, Hindi and Urdu. About 30 per cent of them have experience in collecting demographic and health data in different India Population Projects (IPP) carried out by different organizations.

Field staff were trained during September 28 to October 7, 1998. Field operation started on October 9, 1998 and was completed on November 30, 1998. Data collection work was reviewed when the team took a break for two days during Deepavali festival and doubts were cleared on some questions. To facilitate all these operations to be carried out in the field, a vehicle has been provided for each team. In general, between 10 a.m. and 3 p.m. house-listing, mapping and selection of households are carried out, and interviews are conducted between 6 am and 10 a.m. and 4 p.m. and 8 p.m. Teams used to be in the primary sample unit (PSU) by 6 a.m. and leave by 8 p.m. All these field operations were completed in a day in many PSUs and more than one day in the remaining PSUs.

Data collection has been carried out in each selected district by a team consisting of a supervisor-cum-editor, three female investigators and a male investigator. There are two major field operations in the survey, namely, i) house-listing, mapping, and selection of sample households, and ii) interviews. House-listing and mapping have been carried out by two persons together. While one person records the particulars in the house-listing form for each household, other person maps the household. This procedure minimizes the error of assigning different numbers in house-listing form and map for the same household. The Supervisor has prepared a consolidated list of households and map for the PSU. After selecting the required number of households to be interviewed, the supervisor assigns the lists which contains household number, name of the head of household, address, date assigned, result of interview of household and woman questionnaires to the investigators. At the end of interviews, a consolidated list in Supervisor's Assignment Sheet' is prepared from all Investigator's Assignment Sheets by the supervisor. In addition, the supervisor is assigned the job of editing the questionnaires and cent per cent spot cheeks in the field itself.

Household questionnaire has been canvassed by the male investigator when male respondent age 20-54 is available in the household. In other cases, the household and woman questionnaires have been canvassed by the female investigator.

1.7 Data Processing and Tabulation

Data entry software provided by the International Institute for Population Sciences has been experimented by entering more than 1000 questionnaires. The software is found to be adequate and only minor changes have been made to suit the local conditions. (Table 1.7)

Table 1.7. Sample Results for Households, Males and Eligible Women, Belgaum district, Karnataka, 1998

	Total	Rural	Urban
Households Selected	1100	837	258
Households	1090	832	263
Completed	7	3	4
Households present but not competent respondent at home	0	0	0
Households Absent	0	0	0
Postponed	0	0	0
Refused	0	0	0
Dwelling Vacant/ Address Not a Dwelling	0	0	0
Dwelling Destroyed	0	0	0
Dwelling Not Found	0	0	0
Other	3	2	1
HH Response Rate* (HRR)	99.0	99.4	98.0
Total Eligible Women			
Eligible Women	1048	817	231
Completed (Interviewed)	892	695	197
Not at Home	136	109	27
Refused	4	2	2
Partly Completed	1	1	0
Other	15	10	5
EW Response Rate* (EWRR)	85.1	85.0	85.2
Number of Males Interviewed	270	218	52

^{*} HRR = (Households Interviewed/1100)*100

^{**} EWRR = (Eligible Women Intérviewed/Total Eligible Women) * 100

CHAPTER 2 HOUSEHOLD CHARACTERISTICS

2.1 General Characteristics

The survey covered 99 per cent of the households in the sample of which 76 per cent were rural and the rest urban. Hindus constituted about 82 per cent, Muslims 11.9 per cent and 1.1 per cent Christians in the population. Among the Hindus 21 per cent belonged to Scheduled Castes and Scheduled Tribes and 27 per cent to Other Backward Castes (OBC) (Table 2.1).

In the sample, only 13 per cent of the houses were reported as Pucca and the rest Kuchha or Semi-Pucca. About 6 per cent of rural and 35 per cent of urban households were provided drinking water through taps. The other major source of drinking water was hand pump - 65.7 per cent in rural and 42.2 per cent in urban. The rest got drinking water from wells.

2.2 Marriages, Births, Infant Deaths and Morbidity

During the reference period (during 1-1-1995 to date) a total of 259 marriages are reported - 204 in villages and 55 in urban areas. The mean age at marriage of boys in rural areas is 23.5 years and urban areas 25.8 years while that of urban girls is two years higher than rural (16.7 and 19.0 years). The Crude Birth Rate (CBR) is estimated to be 24.0. Looking at the performance of the family planning programme in the district during last two decades, the CBR estimated is not surprising. The urban CBR is estimated at 22.8 (Table 2.2).

In the survey, 8 infant deaths were reported suggesting low infant mortality rate. The number reported cases of leprosy and tuberculosis are 3 and 6, respectively. However, the number of malaria cases reported are large (102 by number) (Table 2.2).

Table 2.1. General Characteristics of Households Surveyed in Belgaum district of Karnataka state

Karnataka State			
Indicators	Total	Rural	Urban
1. Number of households interviewed	1090	832	258
2. Household Population			
Total	5916	4601	1315
Male	3037	2364	673
Female	2879	2237	642
Sex ratio(F/M *1000)	947	946	953
Number of currently married		01.4	220
Women(15-44 years)	1044	814	230
3. Percent of Households by Religion			
Hindu	82.1	82.9	77.5
Muslim	11.9	9.5	19.3
Christian	1.1	1.3	0.3
Sikhs	0.4	0.4	0.3
Buddhists	0.0	0.0	0.0
Others	4.4	5.0	2.3
4. Percent of Households by Caste			
Scheduled Caste	10.5	9.7	2.0
Scheduled tribe	4.8	4.9	0.2
Other Backward Class	19.0	14.5	7.5
Others	65.6	70.7	90.0
5. Percent of Households by Type of House			
Kachcha	17.0	19.1	10.4
Semi pucca	70.0	71.7	64.7
Pucca	12.8	9.1	24.8
6. Percent of Households by Source of Drinking Water			
Tap	13.2	6.4	34.8
Hand Pump	60.1	65.7	42.2
Well	20.2	21.3	16.6
, Others	69.0	53.0	16.0

Table 2.2. Marriages, Births, Mortality and Morbidity in Belgaum district of Karnataka state

Indicators	Total	Rural	Urban
1. Marriages during 1-1-95 to 30-6-98			
(a) Total number of marriages	250	204	
(b) Mean age at marriage for Boys	259		5
(c) Mean age at marriage for girls	23	23	2:
(d) Boys marrying at age less than 21 years (%)	21	16	1
(e) Girls marrying at age less than 18 years (%)	55	25 60	4
2. Births (Reference period: 1-1-95 to 30-6-98)	33	00	4.
(a) Number of births reported Total			
Male	484	382	10:
Female	253	197	5
(b) Average annual CBR	231	185	4
(b) Average annual GMFR	32	32	31
(c) Percent distribution of births by order of birth	132	133	12
ter retreate discribation of births by order of birth			
2	32.4		34.
3	30.7	25.6	33.
4+	22.7	20.0	19.
1	14.0	12.2	12.
3. Deaths among children born during 1-1-95 to 30-6-97* in			
(a) Neonatal period	6	4	
(b) Post neonatal period	1	ol	
(c) Infancy			
Hale	4	2	
Female	3	2	
Average annual IMR	34	24	6
4. Number of neonatal deaths among children born			
during 1-1-95 to 30-6-98 due to tetanus	3	3	
5. Number of Maternal Deaths Reported during 1-1-95 to 30-6-98	4	4	
6. Major illnesses			
(1) Number of cases reported			
(a) Leprosy			
Male	3	2	
Female	0	0	
(b) Malaria			
Male	47	41	
Female	55	47	
(c) Tuberculosis			
Male	2	1	
Female	4	2	
(2) Number of cases treated			
(a) Leprosy			
Male	3	2	
Female	0	0	
(b) Malaria			
Male	47	41	
Female	55	47	
(c) Tuberculosis			
Male	2	1 2	

^{*} End point reference period is restricted to 30-6-1997 to ensure one year exposure for all births.

** Reference period is 3 months prior to survey.

CHAPTER 3 FERTILITY CHARACTERISTICS OF THE WOMEN

3.1 Characteristics of Currently Married Women

About 40 per cent of eligible women were in 20-29 age group. Age at consummation of marriage of women revealed that 81.1 per cent in rural area had consummated below 18 years as compared to 59.3 per cent in urban area (Table 3.1).

3.2 Children Ever Born and Living

The data collected on fertility reveal that mean number of children ever born (CEB) to women in Belgaum is 2.8 of which 1.5 male and 1.3 female. This reflects the higher acceptance of contraception in the district (Table 3.2).

3.3 Outcome of the Pregnancy

The survey data revealed that 94 per cent of pregnancies have resulted in live births, 2.1 per cent as still births, 3.1 per cent as spontaneous abortions and the rest (0.6 per cent) as induced abortions. Still births and spontaneous abortions are more in 15-19 age group (Table 3.3).

Table 3.1. Percentage distribution of currently Married Women age 15-44 years by selected characteristics in Belgaum District of Karnataka state

ockground Characteristics	Total	Rural	Urban
	.000		0 2 2 3 1 1
. Age group (years)			
15-19	10.9	11.5	8.5
20-24	19.3	19.4	19.1
25-29 30-34	20.4	21.4	17.0
35-39		15.7	18.0
40-44	16.2	13.7	17.0
. Age at Consumation of Marriage			
Below 18 years	76.3	81.1	59.1
18 years and above	23.6	18.8	40.
	23.0	20.0	40.
. Religion	79.7	78.1	85.
Muslim	8.3	8.2	8.
Christian	1.3	1.4	1.
Sikhs	0.0	0.0	0.
Buddhists	0.0	0.0	0.
Others	7.6		4.
. Caste Scheduled Caste	10.7	10.8	10.
Scheduled Tribe	1.2	1.4	0.
Other Backward Class	21.1	20.8	22.
Others	66.8	66.8	66.
6. Education			
Illiterate	60.4	65.8	41.
0-4 @ years	5.0	4.7	6.
5-9 years	22.0		23.
10 years and above	12.5	7.8	29.
6. Husband Education			
Illiterate			
0-4 @ years			8.
5-9 years			
10 years and above	31.2	27.1	45
7. Type of House			
7. Type of House Kachcha			
Semi pucca		1	1
Pucca	16.3	15.2	20
	899	700	1

[@] Literate persons with no years of schooling is included here.

Table 3.2. FERTILITY
Children Ever Born (CEB) and Children Surviving (CS) by Selected Characteristics of currently married
women age 15-44 years in Belgaum District of Karnataka state

	Mean Ch	Children E	Ever Born	Mean Chi	Children Su	Surviving	No. of
Background Characteristics	Male	Female	Total	Male	Female	Total	Tallow.
1. Age group							
15-19	0.3	0.3	9.0	0.3	0.3	9.0	86
20-24				6.0			174
25-29				1.4			184
30-34				1.5	•		167
35-39				1.7	۰	۰	146
PP-04			•	1.8	•		130
2. Residence							
Rural	1.5	1.3	2.8	1.3	1.1	2.5	700
Urban		1.2	•	1.2	1.1		199
3. Religion							
Hindu		1.3					_
Muslim	1.4	1.1	2.6	1.1	1.0	2.2	75
Christian		1.7					
Sikhs		0.0					
Buddhists		0.0	•				
others		1.6					
4. Caste							
Scheduled Caste	1.4	1.4	2.8	1.3	1.3	2.	
Scheduled Tribe	1.9	2.0	3.9	1.3	1.5	2.	
OBC	1.5	1.2	2.7	1.4	1.0	2.	4 190
Others	1.5	1.3	2.8	1.3	1.1	2.	
5. Education							
Illiterate	۰	1.4	3.0	1.4		2.	6 543
0-4 @ years	1.7	1.4	3.2	1.4		2.	
6-9		1.2	2.6	1.2	-	2.	
10 years and above		0.8	1.9	1.0	0.	1.	
All Women	1.5	1.3	2.8	1.3	1.1	2.	5 899

Literate persons with no years of schooling is included here.
† Total may not tally because of missing information

Table 3.3. OUTCOME OF PREGNACY

Percentage Distribution of Pregnancies of Currently Married Women
age 15-44 years in each age group by Outcome of pregnancy, Belgaum
district of Karnataka state

Age Group	Type of Outcome					Number	
	Live Birth	Still Birth	Spont. Abortion	Induced Abortion	Total	Pregnan- cies	
15	-19	85.7	3.9	10.3	0.0	100.0	77
20	-24	94.3	1.9	3.1	0.5	100.0	355
25	-29	93.7	2.2	3.2	0.6	100.0	578
30	-34	95.0	1.7	2.7	0.5	100.0	583
35	-39	93.5	2.7	3.0	0.7	100.0	554
40	-44	94.6	1.9	2.4	0.8	100.0	562
All Women		94.0	2.1	3.1	0.6	100.0	2709

CHAPTER 4

UTILIZATION OF MATERNAL AND CHILD HEALTH SERVICES

4.1 Maternal Services

a. Ante-natal Care (ANC)

Most of the women - 91.1 per cent in rural and 93.9 per cent in urban had received ANC. Their proportion was higher among literates as compared to illiterates, and in 20-34 age group as compared to younger women (Table 4.1)/Fig. 4.1.

b. Type of Ante-Natal Care (ANC)

The per cent of women who had received TT, Iron and Folic Acid tablets and 3 ANC visits was found to be only 48 per cent. Blood pressure was measured for 55.9 per cent of pregnant women and 42.7 per cent of women were weighed during pregnancy. It is surprising that though 62.5 per cent of pregnant women were supplied IFA tablets only 27 per cent are reported to have taken the tablet regularly (Table 4.2)/Fig. 4.2.

c. Reasons for Not Getting ANC

The number of women who did not receive any ANC was 25 and they reported that lack of knowledge of services, not finding it necessary or customary were the main reasons for not seeking ANC (Table 4.3).

d. Pregnancy Complications and Treatment

Women reporting some complications arising from pregnancy constituted 44 per cent. Majority among them complained of weakness or tiredness (27.6 per cent) and dizziness (15 per cent). Among them 71 per cent sought treatment for the complications - mainly from private doctor/nurse (Table 4.4)/Fig. 4.3.

Figure 4.1: Number and timing of antenatal visits

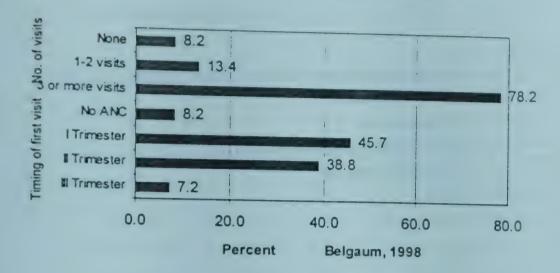
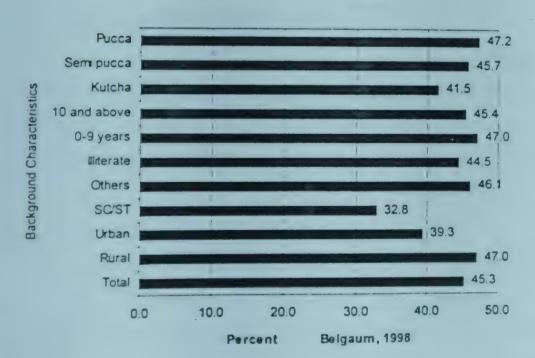
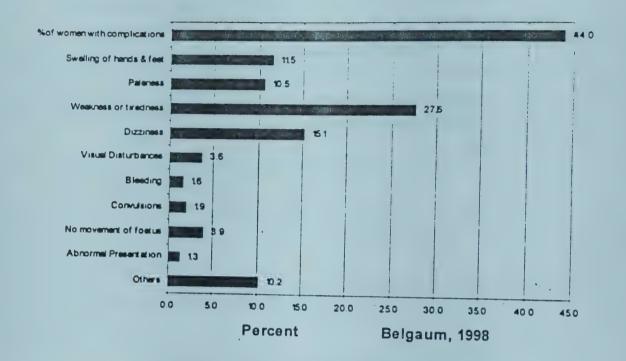


Figure 4.2: Percent of women who received Full ANC by background characteristics



VIE ALTM

Figure 4.3 Type of complications during pregnancy



e. Natal Care

Only half (50.6 per cent) of deliveries in the district were conducted in health institutions - 33.7 per cent of them in government and 66.2 per cent in private. Forty nine per cent of births had occurred at homes, conducted mainly by untrained dais, relatives. neighbours or friends (75.3 per cent) followed by ANMs (13.3 per cent). In only 26.6 per cent of home deliveries Disposable Delivery Kits (DDK) were used (Table 4.5).

f. Post-Natal Care

Only 23 per cent of women had received a post-delivery follow up visit by a health personnel (within two weeks). About 30 per cent women reported post-delivery complications like high fever, lower abdominal pain, excessive bleeding etc. Of them, 35.7 per cent sought treatment mainly from government sources. Private sources provided treatment to about 64.3 per cent of women (Table 4.6)/Fig. 4.4 and 4.5.

4.2 Child Care

a. Birth Weight of New Born Babies

About 42 per cent of new born babies were weighed soon after birth (38.2 per cent in rural and 56.1 per cent in urban areas) and it was found that 19 per cent of them were under weight (less than 2.5 Kg.). Per cent of under weight babies was higher in rural areas (20.3 per cent) compared with urban areas (16.0 per cent).

b. Immunisation of Children

Nearly sixty five per cent of children age 12-23 months were fully protected against Polio, DPT, Measles and Tuberculosis. Ninety per cent had BCG, 85.5 per cent had received 3 doses of Polio and 77.5 per cent 3 doses of DPT. However, over half of the children had not received any Vitamin 'A' dose and only 7.6 per cent had received IFA tablets/liquids (Table 4.7)/Fig. 4.6.

Figure 4.4: Type of delivery complications

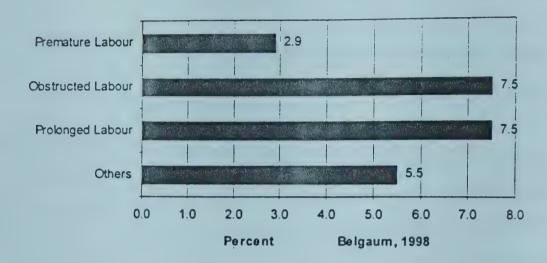


Figure 4.5: Type of post delivery complications

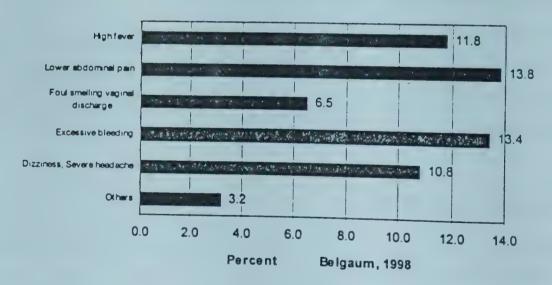
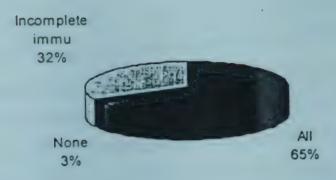


Figure 4.6 Percent Fully Immunized Children Aged 12-36 months: Belgaum, 1998 (BCG+3DPT+3Polio+Measles)



c. Source of Immunisation

Most of the children (about 89 per cent) had received immunization from the government sources. Those who received from private sources was higher in urban areas (29.3 per cent) as compared to rural areas (5.5 per cent) (Table 4.8).

d. Reasons for Not Immunising the Child

No major reason was cited for not receiving immunisation (Table 4.9).

e. Breast-feeding and Weaning Practices

Per cent of women who were advised on breast-feeding was about 71 per cent. It was higher in urban area (73 per cent) as compared with rural (71 per cent). 47.5 per cent of children were breast-fed on the day of their birth. Over 87 per cent of babies were on exclusive breast milk. Children who were exclusively breast-fed for at least four months were 93.3 per cent. Only 6.6 per cent of children were introduced to semi-solid food at fifth or sixth month and it was about 11 per cent during seventh to twelfth month for solid food (Table 4.10).

f. Awareness and Treatment about Diarrhoea and Pneumonia

Over 89 per cent of women were aware of what to do in case the child gets Diarrhoea. Above thirty per cent of them knew about ORS. Only 11.9 per cent of children suffered from diarrhoea during the reference period and 17 per cent of them had received treatment at government and 57 per cent from private health care sources (Table 4.11)/Fig. 4.7.

Awareness regarding Pneumonia was very low - only among 17.3 per cent women. 19.3 per cent of women reported that their child suffered from pneumonia during the reference period and 15.7 per cent were treated at government hospitals and 77 per cent in private hospitals. Only less than 2 per cent reported that they did not treat their children during pneumonia episode (Table 4.11)/Fig. 4.7.

Figure 4.7: Type of Treatment Given To children with Diarrhoea

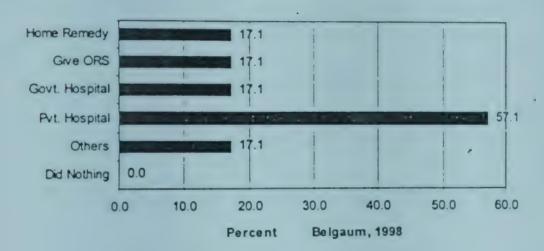


Table 4.1. ANTENATAL CARE
Percentage Distribution of women * by Source of Antenatal Care (ANC) during pregnancy, in each category of
selected characteristics in Belgaum District of Karnataka state

		Aic	130	Total	Number	Percentage with ANC by	age dist C by sou	Percentage distribution of with ANC by source of ANC	of women
Background Characteristics		3	(2)	6	(4)	ANC at home from H.W.	Govt. Health Facili- ty (6)	Private Health Facility	Other (8)
1. Broad Age Group Les	Less than 20 years 20-34 35 years and above	90.4 91.8 100.0	9.5	1000	42 256 6	18.4	55.2 35.7 33.3	23.6 43.4 33.3	2.6
2. Residence	. Rural Urban	93.9	8.8	100	238	23.5	40.5	35.0	0.9
3. Education .	Illiterate 0-4 @ years 5-9 years 10 years and above	88.0 100.0 95.7	12.0 0.0 4.2	1000	175 15 70 44	30.5 6.6 11.9	46.1 46.6 29.8 20.9	21.4 46.6 58.2 79.0	0.00
4. Religion	Hindu Muslim Christian Eikhs Buddhists Others	911.4	m m · · · · · · · · · · · · · · · · · ·	1000	245 25 00 00 00 25	20.9	56.5	39.1	0.00
5, Caste S	Scheduled Caste Scheduled tribe OBC	90.6 50.0 92.0	50.0 2.9	1000	32 2 63 150	24.1 100.0 15.5 22.0	41.3 0.0 43.1 35.2	34.4	0.0 0.0 4.0
6. Type of House	Kachcha Semi pucea Pucca	95.2 95.2 88.1	17.7	100	62 191 42	21.5 19.7 18.9	29.4 41.7 40.5	49.0 37.3 37.8	0.0
All Women		91.7	8.2	100	304	20.0	38.3	40.5	1.0

Women who had their last live/still birth since Jan, 1995.
 Percentage may exceed 100 due to multiple answers.
 Literate persons with no years of schooling is included here.

Table 4.2. TYPE OF ANTENATAL CARE(ANC)
Forcestage Distribution of women * by Type of Ante Natal Care by selected background characteristics in Belgaum District of Karnatabe state

מימימ	ı	I	I		I	۱					
	TOTAL	Rest	Residence	Cast	te	Ed	Education		Type	se of House	9
Intenstal Care .		Rural	Urban	sc/ct	Other	11116.	0-90 years	10 years	Kutcha	Semi- Pucca	Pucca
. Percentage Distribution of Women by Number											
Of Ast Visits		8	6.0		6	5	~		6	6.9	2.7
1-2	13.4	13.0	15.1	17.1	12.2	73.7	14.1	9.6	13.2	76.4	88.8
ribution of Women by Ti											
First ANC Visit			6.0			2					2
First Trimester			57.5								72.2
Second Trimester	38.8	41.1	30.3	2.8	36.1	8.0.0	9.00	0.0	3.7	6.8	· ~ ·
3. Percent of Women		37.4			44.4						6
E. Shore Plood Pressure the Beautred	55.9	\$0.4	75.7	47.1	56.1	42.8	65.8	9.88	28.3	58.4	80.5
		65.5			60.5						5
Who took		26.8			26.6	3					٠, د
Who took		33.1			27.2	36.5					7
(. Who were given Tetanus Injection	4			0							2
One Injection	11.5	11.3	12.1	10.0	12.2	12.5	. 12.9	4.5	11.3	11.3	13.8
	2			0			8				m .
Do not remember											
g. Who had Abdominal Check-up									0	-	
2-2		29.6				2	7			28.7	
3 OF SOLE	54.9	52.9	62	52.8	54.4	9	63.5	72.7	6.05	54.2	9.99
Do not remember		2	-							2.3	
h. Who had Full TT + IFA + atleast 3 ANG	48.0	50.4	39.3	40.0	47.2	48.0	48.2	47.7	43.4	49.0	47.2
1. Who had 2TT + IFA + atleast 3 ANC	42.1	44.1	34.8	35.7	40.5	41.1	43.5	43.1	37.7	43.4	38.8
None of Moneon	304	238	99	70	180	175	9.5	**	53	212	36
					1						

* Momen who had their live/still birth since ist January 1995.

Percentage Distribution * of women ** who did not get any Ante Natal Care by Reason in Belgaum District of Karnataka state Table 4.3. REASON FOR NO ANC

	Total	Resi	Residence	Caste	te	Ed	Education	
Background Characteristics		Rural	Urban	SC/ST	Other	Illit.	0-90 years	10 years
1. Lack of Knowledge of Services	4.4	2.5	20.0	0.0	5.1	5.4	0.0	0.0
2. Did Not Feel the necessity	52.2	52.5	50.0	9.99	50.0	55.4	42.8	0.0
3. Not Customary	2.2	1.2	10.0	0.0	2.5	2.7	0.0	0.0
4. Financial Cost	2.2	2.5	0.0	0.0	2.5	2.7	0.0	0.0
5. Distantly Located	2.0	1.0	1.0	0.0	2.0	2.0	0.0	0.0
6. Poor Quality Services	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
7. Home visit by health staff	26.6	28.7	10.0	25.0	26.9	24.3	42.8	0.0
β. No time to go	1.1	1.2	0.0	0.0	1.2	1.3	0.0	0.0
9. Not permitted to go	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
10. Other	4.4	3.7	10.0	8.3	3.8	4.0	0.0	50.0
Number of Women who did not get ANC	06	80	10	12	78	74	14	2

• Percentage exceeds 100 due to multiple reasons. •* Women who had their last live/still birth since Jan 1, 1995. @ Literate persons with no years of schooling is included here.

Percentage Distribution Of women * by pregnancy Complication and Type of treatment sought in Belgaum District of Karnataka state Table 4.4. PREGNANCY COMPLICATIONS

	Total	Resi	Residence	Ed	Education	
ckyround Characteristics		Rural	Urban	Illit.	0-90 years	10 years
Percent of Women who are aware of Pregnancy	69.0	68.9	69.7	59.4	76.4	93.1
Percent of Women who had any Complication during pregnancy	44.0	43.2	46.9	40.5	49.4	47.7
Fercent of Women * by type of Complications Swelling of Hands and Feet	26.1	24.2	32.2	26.7	26.1	23.8
Weakness or Tiredness Dizziness	62.6	61.1	67.7		52.3	57.1
Visual Disturbances	8.2	7.7	9.6	9.8	4.7	9.5
Convulsion Movement of Foetus	4.8	3.8	4.6	4.2	4.7	4.7
Abnormal Presen	2.9	3.8	22.5	14.0	30.9	38.1
a. Percent of Women who had Complications and Sought Treatment	78.3	75.7	87.1	71.8	85.7	85.7
1) Percent of Women who Sought Treatment by Source of Treatment Government Facility Private Facility Others	36.1	39.7 66.6 0.0	25.9	47.0	27.7	22.2
fumber of Women	304	238	99	175	85	44

"Women who had their last live/still birth since 1-1-1995.
"Percentage exceeds 100 due to multiple complications.

Percentage with no years of schooling in included here.

Percentage Distribution of women • by Delivery and Assistance during delivery by Residence, Caste and Education, Belgaum District of Karnataka state Table 4.5. DELIVERY CHARACTERISTICS

	Total	Resi	Residence	Caste	te	Edı	Education	
Place of delivery and assistance received		Rural	Urban	SC/ST	Other	Illit.	0-90 years	10 years
1. Percent of women who had Institutional Deliveries	50.6	46.6	65.1	47.0	51.1	37.1	61.1	84.0
a. Percentage Distribution of institutional deliveries by Type of Institution Government Institution Private Institution	33.7	37.8	23.2	50.0	31.8	44.6	28.8	21.6
2. Percent of women who had Home Deliveries	49.3	53.3	34.8	52.9	48.8	62.8	38.8	15.9
a. Percentage Distribution of home deliveries by Type of Assistance during delivery								
Doctor	11.3	ع. در م	21.7	2.0	12.1	10.9	9.0	28.5
Trained Dai	12.0	12.6	8.7	5.5	12.8	0.6	21.2	14.2
Other	63.3	64.5	56.5	88.8	59.8	68.1	54.5	28.5
b. Percent of Home deliveries where DDK was used	26.6	24.4	39.1	11.1	28.7	24.5	24.2	71.4
 Percent of Women who had post delivery follow-up Visit (Within Two Week) 	23.0	22.6	24.2	17.6	23.7	23.4	21.1	25.0
Number of Women	304	238	99	34	270	175	85	44

• Women who had their last live/still birth since 1995. • Literate persons with no years of schooling is included here.

Percentage Distribution Of women * by Delivery and Post Delivery Complication and Type of treatment sought in Belgaum District of Karnataka state Table 4.6. DELIVERY AND POST DELIVERY COMPLICATIONS

	Total	Resi	Residence	Ec	Education	
omplications/type of treatment		Rural	Urban	Illit.	0-98 years	10 years
. Percent of Women who had Delivery Complications	17.71	15.5	25.7	14.2	16.4	34.0
Type of Complications Type of Complications Premature Labour Obstructed Labour Prolonged Labour(12+ hours) Any other	16.6 42.5 42.5 31.4	18.9 40.5 45.9	11.7 47.0 35.2 29.4	16.0 40.0 48.0 40.0	14.2 64.2 42.8 14.2	20.0 26.6 33.3 33.3
3. Percent of Women who had Post Delivery Compl.	30.2	29.8	31.8	30.8	31.7	25.0
4. Percent of Women with Post Delivery Complications by Type of Complications High Fever Lower Abdominal Pain Foul Smelling Vaginal Discharge Excessive Bleeding Dizziness, Sever Headache Other who sought Treatment 1. Percent of Women who sought treatment by Source of Treatment Covernment Private Other	39.1 44.5 44.5 35.8 10.8 10.8 35.7 65.7	46.4 46.4 19.7 46.4 35.2 11.2 11.2 76.0 61.1	14.2 42.8 28.5 38.1 38.1 38.1 76.1	20.0 4.444 12.0 39.0 60.0 60.0	22.22 448.1 222.2 488.1 111.1 55.5 55.5 55.5 55.5	18.1 27.2 36.3 36.3 18.1 0.0 100.0
Number of Momen	304	967	00	1/2	60	7

^{*} Women who had their last live/still birth since 1995.

Percentage exceeds 100 due to multiple complications

[#] Literate persons with no years of schooling is included here. \$ Included Obstructed Labour and Breech presentation.

[.] Total may not tally because of missing information

Percentage Distribution Of Children * (born during 1-1-95 to 30-06-97) who Received Vaccination by Type of Vaccination, Belgaum District of Karnataka state Table 4.7. VACCINATION OF CHILDREN

	Total	Res	Residence	Caste	e e	Ĕ	Education	
Type of Vaccination		Rural	Urban	SC/ST	Others	Illit.	0-90 years	10 years & above
Polio O	30.9	26.6	46.1	40.9	29.9	20.7	32.8	67.6
BCG	90.6	90.2	92.3	86.3	91.1	85.9	97.0	97.0
UPT Doses No DPT	3.6	9.6	2.7	6.3	9.6	6.0	1	
3 2	80.5	80.4	80.7	86.3	79.9	74.0	83.5	97.0
Pollo Doses		5.9	۳. م		1 .	60	4.0	121
1 (2 m	90.2	91.8	84.6	90.9	90.1 85.5	86.6 80.7	94.0	97.0
Measles	72.4	72.8	71.1	17.2	71.9	63.7	9.08	91.1
Full (BCG + 3 DPT + 3 Polio + Measles)	64.8	64.6	65.3	68.1	64.4	54.0	74.6	88.2
Percent of children who had no vaccination at all	3.3	3.2	3.8	9.0	2.8	5.1	1.4	0.0
Vitamin A doses					1	-:	6	5.
→ C	•							
3					9	- œ	د	- 2
44 80	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Iron Folic Acid Tablets/Liquids	7.6	6.5	11.5	13.6	7.0	5.9	8.9	11.7
umber of Children	236	184	. 52	22	214	135	. 67	7 34

...

* Includes only last and last but one living child.

9 Literate persons wiith no years of schooling is included here.
+ Total may not tally because of missing information

Percentage of children * (Born during 1-1-95 to 30-6-97) who had any Immunisation by Source of Last Immunisation, Belgaum District of Karnataka state Table 4.8. SOURCE OF IMMUNISATION

t Hospital 15.7 16.0 17.6 20.0 16.0 18.5 Sub-Centre 2.1 2.8 2.9 13.3 13.5 13.5 e session) 57.0 62.2 35.2 53.3 57.4 e boctor 2.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0			Total	Resi	Residence	Caste	e)	Education	
Government Hospital 15.7 16.0 17.6 20.0 16.0 16.0 13.2 14.7 13.3 13.5 13.8 Sub-Centre 2.1 2.8 2.9 13.3 13.5 13.8 Sub-Centre 2.1 2.8 2.9 13.3 13.5 13.8 Sp. of 62.2 35.2 53.3 57.4 e.g. of 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.	Searce of Immunisation			Rural	Urban	SC/ST	Others	Illit.	0-98 years	10 years
Government Hospital 15.7 16.0 17.6 20.0 16.0 16.0 PHC/CHC 13.6 13.2 14.7 13.3 13.5 Sub-Centre 2.1 2.8 2.9 13.3 13.5 1.8 57.4 Private Hospital 8.7 5.5 20.5 0.0 9.2 Private Doctor 2.1 0.0 8.8 0.0 1.8 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0	Cove roment									
Sub-Centre 2.1 2.8 2.9 13.3 13.5 1.8 ANH (VIllage session) 57.0 62.2 35.2 53.3 57.4 Private Hospital 8.7 5.5 20.5 0.0 9.2 Private Doctor 2.1 0.0 8.8 0.0 1.8 0.4 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0		Government Hospital	15.7	16.0	17.6	20.0	16.0	10.0	23.0	28.0
Sub-Centre 2.1 2.8 2.9 13.3 1.8 ANM (VIllage session) 57.0 62.2 35.2 53.3 57.4 Private Hospital 8.7 5.5 20.5 0.0 9.2 Private Doctor 0.0 0.0 0.0 0.0 0.0 0.4 0.0 0.0 0.0 0.0 100.0 100.0 100.0 100.0 100.0 100.0 100.0 1		PHC/CHC	13.6	13.2	14.7	13.3	13.5	14.0	13.4	12.0
ANM (VIllage session) 57.0 62.2 35.2 53.3 57.4 Private Hospital 8.7 5.5 20.5 0.0 9.2 Private Doctor 2.1 0.0 8.8 0.0 1.8 0.4 0.0 0.0 0.0 0.0 0.4 0.0 0.0 0.0 0.0 100.0 100		Sub-Centre	2.1	2.8	2.9	13.3	1.8	4.0	1.9	0.0
Private Hospital 8.7 5.5 20.5 0.0 9.2 Private Doctor 2.1 0.0 8.8 0.0 1.8 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0			57.0	62.2	35.2	53.3	57.4	68.0	44.2	40.0
Private Hospital 8.7 5.5 20.5 0.0 9.2 Private Doctor 2.1 0.0 8.8 0.0 1.8 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0	Private									
Private Doctor 2.1 0.0 8.8 0.0 1.8 0.0 1.8 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0		Private Hospital	8.7	5.5	20.5	0.0	9.5	4.0	13.4	16.0
0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0		Private Doctor	2.1	0.0	80.80	0.0	1.8	0.0	3.8	4.0
100.0 100.0	0		0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
100.0 100.0	DO NOE KNOW		0.4	0.0	0.0	0.0	0.0	0.0	0.0	0.0
ion 228 178 50 15 162	rotal Percent		100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
	Number of Children receiving any immunisat	any immunisation	228	178	90	15	162	128	99	34

Includes only last and last but one living children.

Literate persons with no years of schooling is included here.

Percentage of children * (Born during 1-1-95 to 30-6-97) who did not Receive Immunisation by Reason and Type of Immunisation, Belgaum District of Karnataka state Table 4.9. REASON FOR NOT GIVING IMMUNISATION

Reasons	BCG	DPT	POLIO	MEASLES None **	None **
1. Unaware of Need of Immunisation	0.0	21.4	12.5	50.0	0.0
2. Place & Time of Immunisation Unknown	0.0	0.0	0.0	0.0	0.0
3. Fear of Side Effects	0.0	0.0	0.0	0.0	55.5
4. No Faith in Immunisation	0.0	0.0	0.0	0.0	0.0
5. Place and Time of Immunisation Inconvenient	0.0	0.0	0.0	0.0	11.1
6. Long Waiting Time	0.0	0.0	0.0	0.0	0.0
7. ARM Absent	0.0	0.0	0.0	0.0	0.0
8. Vaccine Not Available	0.6	14.2	12.5	0.0	0.0
9. Other	6.06	64.2	75.0	50.0	33.3
Total Percent	100.0	100.0	100.0	100.0	100.0
Number of Children who did not receive any immun.	22	39	16	65	8

* Includes only last and last but one living child.

.. Not BCG, DPT or POLIO.

Percentage of women * given advise on breast feeding and who gave Colostrum to Child, Belgaum District of Table 4.10. BREAST FEEDING AND CHILD NUTRITION Karnataka state

	Total	Resi	Residence	Caste	9	03	Education	
Background Characteristics		Rural	Urban	SC/ST	Others	Illit.	0-90 years	10 years
1. Percent of Women who were Advised on Breast feeding	71.4	71.0	73.0	70.5	91.1	65.4	75.6	86.3
a. Perecent distribution of women who were advised by source of advice Doctor Nurse/ANM Other	56.6 30.0 19.5	50.6 34.1 20.7	78.2 15.2 15.2	445.8 25.0 25.0	537.1 30.6 18.8	48.1 38.1 19.0	54.8 27.4 25.8	84.2 10.5
2. Percent of women who breastfed the child within two hourse of birth After two hourse but same day 1-3 days	37.7 9.8 35.7 15.6	35.9 10.8 35.9 16.4	44.4 6.3 34.9	35.2 14.7 29.4 14.7	38.2 8.8 36.2 16.1	32.7 11.9 38.1	40.2 35.3 14.6	52.2 4.5 27.2 13.6
 Percent of women whose children were ** breast-fed exclusively for four months 	93.8	93.0	96.8	91:1	94.1	94.6	93.9	6.06
4. Percent of women (with childs age> 5-12 months), who introduced their children to Semi-Solid Food	71.7	71.0	74.6	58.8	72.5	9.69	69.5	84.0
5. Percent of women (with childs age> 7-12 months), who introduced their children to Solid Food	37.4	35.5	44.4	29.4	38.7	38.1	29.2	50.0
Number of Women	294	231	63	34	204	168	82	44

* With youngest child born after 1-1-1995.

& Literate persons with no years of schooling is included here. ** Children less than four months are not considered.

Table 4.11.AWARENESS OF DIARRHOEA AND PNEUMONIA
Percentage of women * with last Child Born After 1-1-95, who are Aware of Diarrhoea and danger of Pneumonia and practices Followed during Diarrhoea and Pneumonia Episodes, Belgaum District of Karnataka state

	TOTAL	Resi	Residence	Cas	Caste	EC	Education	
AWARENESS OF DIARRHOEA AND PNEUMONIA		Rural	Urban	SC/ST	Other	1111t.	0-90 years	10 years
1. Percent of women aware of what to do if child gets Diarrhoea a. Percentage distribution of Women by reported type of practices to be followed if child gets diarrhoea	89.1	87.0	96.8	82.3	90.6	84.5	92.6	100.0
Given ORS	30.6	28.1	39.6	17.6		20.8	41.	47.7
Continue Normal Food	1.3	B. 6		2.0	0.0	7.7	1.2	2.2
Give Plenty of Fluids	20.7	16.4	36.5	9.8	23.0		26.	38.6
Do not know	10.8	12.9	53.6	17.6	55.3		52.4	0.0
E	•	•						
a. Percent of women by Type of Treatment given to children with diarrhoea	11.9	11.2	14.2	14.7	12.7	10.7	13.4	13.6
Hon	17.1	11.5	33.3	0.0		11.1	27.2	16.
Gave ORS	17.1	19.2	11.1	20.0	19.	11.1	27.2	16.
Treated in Government Hosp.	17.1	19.2	11.1	40.0	11.	11.1	27.	16.
Treated in Private Hosp.	57.1	61.5		60.0		55.5	63.	<u>-</u>
Did Rothing	0.0	23.0	0 0	000	23.0	11.1	36.3	0.0
3. Percent of women aware of danger signs of		-	0	•			, 	
Pneumonla	17.3	16.8	19.0	8.8	1 19.1	14.8	20.7	20.4
a. Percentage distribution of Women by reported danger signs								
Difficulty in Breathing	13.6	13.8	12.7	8.8	15.	11.3	17.	
Chest In-drawing	D	0,0	3.1	2.0			12.	2.
	2.0	1.1	4.7	0.0	7.0	1.1	0.0	7 9
	5.7	6.9	1.5	0.0			3	
Condition gets Worse than before	9.0	0.4	1.5	0.0			2.	
Wheezing/Whistling	1.0	0.8	1.5	0.0			-	
Rapid Breathing	0.3	0 0	0.0	0.0			0.0	
2. Percent of women whose Child & Suffered from		1.00		71.1	0.00			
	19.3	20.3	15.8	14.7	18.1	21.4	17.0	15.9
a. Percent of women by Type of Treatment	_		٠					
Home Remedy	7.0	8.5	0.0	20.0				
Treated In Government Hosp.	15.7	17.0	10.0	60.0				
Treated in Filade Hosp.	7. 8	- 0	20.0	20.0	D			100.0
Did Nothing		2.1	0.0	0.0	2.7	0.0	0.0	
Number of Women	294	231	63	34	204	168	182	2
	1							

• With youngest child born after 1-1-1995. •• Fercent exceeds 100 due to multiple response. \$ Children born since January 1995. # Literate persons with no years of schooling is included here. • Total may not tally because of missing information

CHAPTER 5 FAMILY PLANNING

5.1 Knowledge of Contraceptives

Knowledge regarding any one modern contraceptive method was universal while it was lower regarding spacing methods (70.9 per cent). Knowledge of female sterilisation was 98.8 per cent while it gradually declined for other methods - male sterilisation 56.8 per cent, IUD 66.5 per cent, Oral Pill 66.1 per cent and Nirodh only 55.6 per cent. Traditional methods were reported by very few (Table 5.1).

5.2 Current Use of Contraception

About 62 per cent of eligible women were currently using a contraceptive method - 58.5 per cent female sterilisation only. Contraceptive practice was, surprisingly, higher in rural (62.4 per cent) as compared to urban (59.8 per cent). The per cent female sterilisation was higher in rural (59.8 per cent) compared to urban (53.7 per cent). Use of spacing methods was very low (Table 5.2)/Fig. 5.1.

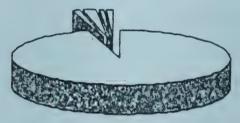
5.3 Source of Motivation and Supply of Modern Methods of Contraception, Side Effects of Contraception and Satisfaction with Current Use

Most of the contracepting women reported that they were self-motivated or motivated by their husbands to accept a method (34 per cent). Motivation by health personnel accounted for 32 per cent (Table 5.4).

Sterilisation services were mainly provided at government facilities (84.4 per cent) while spacing methods were provided by both government and private facilities (Table 5.4).

Figure 5.1: Method of Contraception Currently Used Belgaum, 1998

Male Sterilization IUD PIII Condom 1% 2% 0% 1%



Female Sterilization 95%

5.4 Reasons for Discontinuation and Current Non-Use

Forty four per cent of women who had discontinued contraceptive use reported that they wanted to have a child and an equal proportion of women reported that they discontinued because of other reasons (Table 5.6).

5.5 Reasons for Never Using Contraception

About 60 per cent of the women who had never used any contraceptive method in the past reported variety of reasons that are put in 'others' category. The rest of the women reported 'against religion' (1.2 per cent) and lack of knowledge regarding family planning methods as reasons for non-use (Table 5.6).

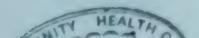
5.6 Intention to Use Contraception and Unmet Need

The current non-users were advised to use contraception to limit their family size. The data show that 73.6 per cent were advised to opt for female sterilisation followed by IUD - 12.7 per cent. What is most surprising is that only 3.6 per cent of women were told to use condoms. There is clear indication that family planning personnel themselves pressurise women to opt for female sterilisation (Table 5.7).

A large proportion of non-users (71 per cent) expressed their intention to use a contraceptive method in the future and 94.7 per cent of them wanted to adopt female sterilisation and only 3 per cent spacing method (Table 5.7). However, the un-met need for family planning methods in Belgaum district is estimated at 17.4 per cent - 12.2 per cent for spacing method and 5.2 per cent for limiting (Table 5.8).

5.7 Males Choice of Family Planning Methods

Most of the males in 20-54 age group have shown preference for female sterilisation (88.8 per cent) and only about 3 per cent for spacing methods like IUD (1.8 per cent), Oral Pills (1.1 per cent). Male methods like Vasectomy or Condom were preferred only by 4.8 per cent males. One of the important reasons reported for preferring female methods (female sterilisation) by males is the fear of weakness (Table 5.9).



Percentage of Currently Married Women age 15-44 years Knowing Contracptive Method by Residence, Caste and Edu-cation, Belgaum District of Karnataka state Table 5.1.KNOWLEDGE OF CONTRACEPTIVE METHODS

	TOTAL	Resi	Residence	Caste	te	Ed	Education	
Method		Rural	Urban	SC/ST	Other	Illit.	0-90 years	10 years
1. Percent of women knowing All modern methods	40.4	35.8	56.7	39.8	32.7	26.7	50.4	85.0
Any modern spacing method	10.9	67.0	84.9	62.0	56.8	60.4	83.0	92.6
Any modern method	0.66	98.7	100.0	99.0	77.5	98.9	99.1	99.1
Any method	0.66	98.7	100.0	0.66	77.5	98.9	99.1	99.1
2. Percent of women knowing specific method								
Female Sterilisation	98.8	98.5	100.0	99.0	77.3	6.86	99.1	98.2
Male Sterilisation	56.8	54.4	65.3	51.8	46.2	48.9	59.5	9.88
IUD/Loop	66.5	61.7	83.4	57.4	53.4	54.8	79.3	7.96
Pill	66.1	61.8	81.4	58.3	53.4	53.9	80.1	94.7
Condom/Nirodh	55.6	50.0	75.3	48.1	44.1	40.8	71.0	92.9
Rhythm/Period Abstinence	24.0	22.0	31.1	17.5	20.9	14.5	28.9	58.7
Withdrawal	4.8	3.1	11.0	4.6	4.4	1.8	4.9	19.3
Other Methods	0.8	1.1	0.0	6.0	9.0	0.9	1.2	0.0
Number of Women	899	700	199	108	791	543	242	114

6 Literate persons with no years of schooling is included here.
+ Total may not tally because of missing information

Percentage of Currently Married Women age 15-44 years Using Contracptive Method by Residence, Caste and Education, Belgaum District of Karnataka state Table 5.2. CURRENT USE OF CONTRACEPTION

	TOTAL	Resi	Residence	Caste	te	Ec	Education	
let hod		Rural	Urban	SC/ST	Other	1111t.	0-98 years	10 years
Percent of women using any method a. Any Modern Method b. Any permanent method li. Any spacing method b. Any Traditional method	61.8 61.6 59.1 2.4	62.4 62.2 60.2 2.0 0.1	85.83 85.23 8.00	63.8 63.8 0.0	49.0 49.0 47.0 2.0	62.8 62.2 62.2 0.0	62.4 62.4 60.7 1.6	56.1 54.3 41.2 13.1
Percent of women using specific method Female Sterilisation Male Sterilisation IUD/Loop Pill Condom/Nirodh Rhythm/Period Abstinence Withdrawa	58.5 0.6 0.3 0.07	8.00 0.02 0.00 0.00	5.8 2.0 2.0 5.0 5.0 5.0 6.0 6.0	62.0	6.00 8.00 8.00 0.00	61.0 0.0 0.0 0.0 0.0	6.00	41.2 0.0 6.1 2.6 1.7 1.7
3. Non Users	38.1	37.5	40.2	36.1	29.3	37.2	37.6	43.8
Number of Women	899	700	199	108	191	543	242	114

Literate persons with no years of schooling is included here. * Total may not tally because of missing information.

Table 5.3. Contraceptive Prevalence Rate by Selected Characteristics
Percent of Current Married Women age 15-44 years by Current Use and ever use of Contraception According to Selected Background Characteristics, Belgaum District of Karnataka state

		Current	Use Status	15	Use		No. o:
	Use Modern Method	Use Tradit. Method	Use Any Method (CPR)	Not use any method	Ever	Never	Monet
_		0.0	7.1	92.8		92.8	98
2	37.3	0.0	37.3	62.6		60.3	174
25-29		0.0	72.2	27.7		26.6	184
35-39	83.5	0.0	83.5	16.4	83.5	16.4	146
40-44	78.4	0.0	78.4	21.5		20.7	130
2. Surviving Children							
	1.9	000	18.6	98.0	21.5	78.4	103
		0.0				36.2	
3 or more		0.4				14.9	
3. Surviving Sons							
	9.5	0.5	10.0	90.0	11.0	89.0	
2 or more		0.0					396
4. Surviving Daughters					1		
0 -	40.6	0.0	40.6	59.3	42.0	57.9	283
2 or more	71.9	0.0				26.0	
5. Religion							
Hindu	62.6	0.0	62.6	37.3	63.8		
Other	60.7	0.0	60.7	39.2	61.6	38.3	107
All Women	61.6	0.2	61.8	38.1	62.9	37.0	899

+ Total may not tally because of missing information.

Fable 5.4. SOURCE OF HOTIVATION AND SUPPLY FOR MODERN METHODS OF CONTRACEPTION
Percentage Current Users of Modern Methods of Contraception by Source of Motivation and Source of Supply by Method of Use, Belgaum District of Karnataka state

	Meth	od of Co	Method of Contraception	no.		
e entre	Female Steril.	Male Steril.	IUD/Loop	Pill	Condom/ Nirodh	Any Mod. Method
1. Source of Motivation for Contraceptive Use Self Husband	27.5	9.99		33.3		
Health Perconnel Media Others	32.5	m 0 0	8000	9.00	28.5	3.00
2. Source of Supply of Method Government Health Facility Private Health Facility Others Do not know	84.4 15.5 0.0	100.0	41.6 58.3 0.0	. 33.3	14.2 57.1 14.2	82.4 17.1 0.1
Number of users of Hodern Hethods	526	9	12	3	7	554

Table 5.5. HEALTH PROBLEM AND SATISFACTION WITH CURRENT USE
Percentage of Current Users of Modern Methods of Contraception by Health Problems with the use of the Method and Type of Treatment Sought for the Problem by Method of Use, Belgaum District of Karnataka state

	Meth	Method of Co	Contraception	no		
Source	Female Steril.	Male Steril.	IUD/Loop	Pill	Condom/ Nirodh	Any Mod. Method
1. Percent who were Informed about the Side Effects before adopting the Method	39.5	33.3	83.3	33.3	42.8	40.4
2. Percent who had Side Effects/Health Problems due to Use of Contraceptive Method a. Percent of Women/Husbands by Type of Health Problem/Side Effects	16.9	16.6	16.6	33.3	0.0	16.7
Weakness	30.3	50.0	0.0	0.0		30.1
Cramps	1.1	0.0	0.0		* * * * * * * * *	1.0
Weight Gain	3.3	0.0	0.0	0.	•	3.2
Dizziness	10.1	0.0	0.0	0.0		9.6
Breast Tenderness	0.0		0.0	0.0	*	0.0
Irregular Periods	5.6		50.0	0.0	*	6.4
Excessive Bleeding	6.7		0.0	0.0	*	
	0.0		0.0	0.0	*	
White Discharge			20.0	0.0	* . * * * * * * *	
Others	21.3		0.0	100.0	* * * * * * *	21.5
3. Percent of Current Users with Side Effects/Health Problems who Sought Treatment for the Problem a. Percent Distribution of users who sought treatment by Source of treatment	10.2	0.0	8.3	0.0	0.0	6.6.
Government Health Facility Private Health Facility Others	48.1 51.8 0.0	* * * *	100.0	* * * *	* * * *	49.0 50.9 0.0
4. Percent of Current Users who had Follow up visit by Health Worker after Adoption of Contracetion	37.0	33.3	. 50.0	0.0	14.2	36.8
5. Percent of Current Users who are Satisfied with the Contraceptive Method of Current Use	92.9	83.3	100.0	9.99	85.7	7.26
Number of Current Users	526	9	12	3	7	554

Percentage Distribution of Past Users by Reason for Discontinuation of the Method and Current Non-Users by Reason for Non-Use, Belgaum District of Karnataka state Table 5.6. REASON FOR DISCONTINUATION OF USE AND NON USE

	TOTAL	Resi	Residence	Caste	te	Ed	Education	Ī
AWARENESS OF DIARRHOEA AND PNEUMONIA		Rural	Urban	SC/ST	Other	1111t.	0-90 years	10 years
1. Number of Past Users * (Current non-users)	6	5	4	3	9	2	7	3
a. Reason for Discontinuation		C	c	د د	0	C V	2	
method failed/became pregnant	11.1	20.0	00.0	0.0	16.6	50.0	000	0.0
supply related problem	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
side effects/health problems	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
lack of pleasure	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
0.000	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
	44.4	0.0	100.0	9.99	33.3	0.0	50.0	9.99
2. Number of Current Non Users	157	117	40	22	135	91	43	23
a. Reason for Non use	r		C	4	c		C	
Lack of Knowledge about it method	1.2	1.7	0.0	0.0	1.4	1.1	0.0	4.9
Opposition to Family Planning	9.0	0.0	2.5	0.0	. 0.7	0.0	2.3	
Others	94.9	94.8	95.0	95.4	94.8	94.5	95.3	

Excludes Women who are in Menopause or Undergone Hysterectomy.

** Excludes Women who are Pregnant or Want child immediately or in Menopause or Undergone Hysterectomy.

Table 5.7. ADVISE ON CONTRACEPTIVE USE AND FUTURE INTENTION TO USE

Percent of Current Non-Users who were Advised by the ANM/Health worker to use Contracption by Suggested Method;
and who intend to use Contraception in Future by Preferred Method; by Residence, Caste and Education, Belgaum
District of Karnataka state

	TOTAL	Resi	Residence	Caste	ste	Ed	Education	
Advice to Use Contraception/Future Intention		Rural	Urban	SC/ST	Other	111it.	0-90 years	10 years
1. Percent of Current Non Users * Advised by ANM/Health Worker to use Contraception	32.0	31.9	32.5	38.4	31.2	29.7	36.2	34.0
a. Percentage Distribution of Women who were Advised by Method Advised Female Steril.	73.6	75.0	69.2	80.0	·	83.3		
Male Steri	0.0	0.0	0.0	0.0	0.0	0.0		0.0
IUD/Loop	12.7	11.9	15.3	9.9	13.	5.0		
Pill.	10.0	9.5	11.5	9.9		9.9		
Condom/Nirodh	3.6	3.5	3.8	9.9		5.0		
Others	0.0	0.0	0.0	0.0		0.0		
2. Percent of Current Non Users * Indending to								
Use Contraception in Future	55.3	57.4	48.7	53.8	55.5	52.9	59.3	58.0
a. Percentage Distribution of Women intending to								
method Female Sterilisation	95.2	95.3	94.8	100.0	94.6	95.3	96.3	93.1
Male Sterilisation	0.0	0.0	0.0	0.0	0.	0.0	_	
IUD/Loop	1.5	9.0	5.1	0.0		0.9	1.8	3.4
Pill	1.5	1.9	0.0	0.0		1.8		
Condom/Nirodh	0.5	9.0	0.0	0.0	0.5	6.0		
Others	1.0	1.3	0.0	0.0	1.1	0.9	0.0	
3. Number of Non-users	343	263	80	39	304	202	91	50

* Excudes Women who are in Menopause or Undergone Hysterectomy.

Percent of Currently Married Women age 15-44 years with Unmet Need for Family Planning by selected background characteristics in Belgaum District of Marnataka state Table 5.8. UNMET NEED

4 4 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	TOTAL	Resi	Residence	Caste	te)3	Education		Тур	Type of House	
		Rural	Rural Urban	SC/CT	Other	11114.	SC/CT Other Illit. 0-9g	10 years Kutcha Semi- Fucca	Kutcha	Semi- Pucca	Fuces
Toral	17.4	16.7	20.1	13.3	18.4	16.7	17.71	20.1	17.9	17.1	17.5
Limiting	5.5	4.5	7.5	5.3 5.3	5.3	5.7	4.1	5.2	.	6.4	2.5
Spacing	12.2	12.1	12.5		13.0	11.0	8.0 13.0 11.0 13.6	14.9	13.1	12.1	10.0
Number of Women	899	700	199	187	538	187 538 543	242	114	145	625	120

Literate persons with no years of schooling is included here.

Note: Unmet need for Limiting: The Proportion of currently married women who are neither in menopause nor had hysterectomy nor are currently

pregnant and do not want any more chilldren but are not currently using any family planning method.

: The Proportion of currently married women who are neither in menopause nor had hysterectomy nor are currently pregnant and who want more children but after one year or more and are not currently using any family planning method. It also includes women who are unsure whether they want another child or who want another child but are

: Unmet need for Limiting and Spacing. · Total may not taily because of missing information Total Unmet need

unsure when to have a birth.

Unmet need for Spacing

Table 5.9. Males Choice of Family Planning Method for Limiting, Belgaum district of Karnataka state

	Percent
Percentage distribution of males age 20-54 by choice of Family Planning Method for couples who want no more children	
Method Choice	
1. Female methods Female Sterilisation Copper-T/Loop Pills	88.8 1.8 1.1
2. Male methods Male Sterilisation Condom/Nirodh 3. Others	0.0 4.8 1.8
 Percent of males who will choose for oneself the method they advocate for the couple in general 	3.7
 Percentage distribution of males who choose female methods by reasons for not choosing a male method 	
Lack of Sexual Pleasure Fear of Impotency Fear of Method Failure Fear of Operation Fear of Weakness Others	0.8 5.2 40.3 4.8 92.7 10.0
4. Number of male respondents	270

CHAPTER 6

RESPONDENTS CONTACT WITH HEALTH WORKER AND PERCEPTIONS ABOUT GOVERNMENT SERVICES

6.1 Home Visits by Health Workers

One of the important functions of the health workers is to provide health care services to the people in their homes. About 36 per cent of respondents were visited by health workers at home. Among them, about 85 per cent of the respondents were visited by ANMs, 37 per cent by male health workers and 5 per cent visits by anganawadi workers in rural areas. Majority of the respondents (63.5 per cent) were satisfied with the time spent by ANM in discussions with women respondents about their health problems (Table 6.1).

However, only 22.5 per cent respondents reported that ANM counselled their unmarried adolescent girls and not even a single respondent received Iron and Folic Acid tablets for their adolescent girls.

6.2 Client Perception about Quality of Government Health Services

Currently married women in 15-44 age group who had visited a government health facility like Hospital, Community Health Centre (CHC), Primary Health Centre (PHC) or Sub-Centre (SC) were asked whether they were satisfied with the services provided and the way the facilities functioned. Seventy six per cent of them reported that they were satisfied with the services and would recommend it to others. An equal proportion of women reported that the working time of the facilities and their locations are convenient, staff explains how to take prescribed medicines and are friendly with patients. However, lower per cent of women felt no waiting time (26.5 per cent), treatment free (30.3 per cent) and treatment at centre effective (94.3 per cent). Per cent of women visiting the health facility during three months prior to survey was only 17.5 per cent (Table 6.2).

Percent of Currently Married Women age 15-44 years from Rural Areas who Reported Home Visits by Health Worker by Type of Health Worker Visited and Satisfaction, Belgaum District of Karnataka Table 6.1. HOME VISITS BY HEALTH WORKERS state

	Total	2	Caste	Ed	Education	
Visit/Satisfactioneristics		SC/ST	Others	Illit.	0-98 years	10 years
1. Percent of respondents who were visited by Health Worker at home during 3 months prior to survey	36.4	30.2	37.3	31.8	44.2	41.0
a. Percentage distribution of Women by category of Health Worker visited						
AIM/LHV	31.0	29.0	31.2	27.3	36.6	39.2
Health Worker Male	11.4	5.8	12.2	11.5	12.5	3.5
2. Percent of Women visited by ANM at Home who Expressed Satisfaction over the Amount of Time	•		•		•	· ·
	162.0	20.0	142.0	87.0	.59.0	15.0
Cotal Number of Women	700	86	614	461	183	99
3. Percent of households where ANM counselled unmarried adolescent girl	21.0	100.0	15.4	21.5	15.0	20.0
. Percent of households where ANM distributed IFA tablets to adolescent girls	0.0	0.0	0.0	0.0	0.0	0.0
umber of Households with Unmarried Girls age 15-19	16	5	11	51	20	5

@ Literate persons with no years of schooling is included here.

Table 6.2. QUALITY OF GOVERNMENT HEALTH SERVICES AND CLIENT SATISFACTION
Percentage Distribution of Currently Married Women age 15-44 years who Visited Government Health Facility by Type of Facility and Satisfaction over Facility in Belgaum District of Karnataka state

	Type	Type of Facility	lity		
acility and Satisfaction	Govt. Hosp.	СНС	РНС	SC	Total
. Percent of Respondents who Visited Health Center During Three Months Prior to Survey	6.1	0.7	9.7	0.8	17.5
a. Percent of Women who Found					
Centers Time Convenient	96.3		96.5	100.0	96.8
Centers Location Convenient Doctor/ANM Available for the Treatment	94.5	100.0	96.5	100.0	96.2
No Waiting Time at Centre	14.5	14.2	34.0	37.5	26.5
rivacy for Enysical Examination Centers Staff Friendly	96.3	100.0	100.0	100.0	98.7
Availability of Medicines at Centre	80.0	100.0	94.3	100.0	89.8
Staff Ready to Explain how to Take Medicines Treatment at Centre Effective	94.5	100.0	94.3	87.5	94.3
Treatment free	40.0	28.5	21.5	. 62.5	30.3
centre good enough to Recommend to others	7.10	C.07	7.07	100.0	13.3
lumber of Women	55	7	88	8	158

CHAPTER 7

REPRODUCTIVE TRACT INFECTIONS, SEXUALLY TRANSMITTED INFECTIONS AND HIV (AIDS)

7.1 Awareness - RTI, STI, HIV (AIDS)

A very small proportion of respondents (2.5 per cent) reported that they were aware of Reproductive Tract Infections (RTI). Not even a single male respondent was aware of RTI in urban area as compared to rural males (3.2 per cent). Awareness among rural females was lower (1.7 per cent) as compared to males. Most of the respondents learnt about RTI from electronic media and others followed by doctors and health workers. (Table 7.1).

Majority of the respondents (over 85.7 per cent among males and 66.6 per cent among females) knew that infection is transmitted through sexual intercourse and about 14 per cent among males and 27.7 per cent among females reported total ignorance regarding the mode of transmission.

Awareness regarding Sexually Transmitted Infections (STI) was low at about 2 per cent. The awareness was brought out mainly by electronic media among males and females. Mode of transmission of the infections was fairly known to males (83 per cent) while 40.7 per cent of females reported ignorance over it (Table 7.2).

Awareness regarding HIV (AIDS) was fairly good - about 84 per cent males were aware while it was lower among females (65 per cent). More urban men and women were aware as compared to rural. While knowledge regarding mode of transmission was over 52 per cent among women - it was 82 per cent among men. Knowledge regarding incurability of HIV (AIDS) was, however, more among men (73.2 per cent) as compared to women (only 2.3 per cent). Most of the women (96.2 per cent) reported ignorance about curability of HIV (AIDS) (Table 7.3).

7.2 Prevalence of RTI/STI (Self Reported Symptoms)

About 14 per cent of among females reported at least one symptom of RTI and over half of them sought treatment for it mostly from the private facility (Table 7.4).

Fercent of Male and Female Respondents who are Aware of RTI by Source of Knowledge, Knowledge of Mode of Transmission and Curability in Belgaum District of Karnataka state Table 7.1. KNOWLEDGE OF REPRODUCTIVE TRACT INFECTION

		Male			Female	
ource	Total	Rural	Urban	Total	Rural	Urban
Percent of Respondents who are Aware of RTI	2.5	3.2	0.0	2.0	1.7	2.6
ribution of Respon						
of Knowledge Electronic Media	42.8	42.8		7.77	9.99	100.0
Doctors	14.2	14.2		38.8	16.6	
Health Workers	14.2	14.2		16.6	25.0	
Others	42.8	42.8		50.0	50.0	L/S
b. Percentage distribution of Respondents by knowledge on Mode of Transmission						
Sexual Intercourse	85.7	85.7		9.99	58.3	83.3
Lack of Personal Hygiene	0.0	0.0		5.5	0.0	16.6
Others	0.0	0.0		16.6	16.6	16.6
Do not know	14.2	14.2	* . * * * * * *	27.7	33.3	16.6
c. Percentage distribution of Respondents by						
knowledge about Curability						
Curable	42.8	42.8	• • • • • • •	22.2	. 33.3	0.0
Not curable	42.8	42.8	*.	72.2	58.3	100.0
Do not Know	14.2	14.2	• .	5.5	8.3	0.0
Number of Respondents	270	218	52	899	019	229

+ Total may not tally because of missing information.

Percent of Male and Female Respondents who are Aware of STI by Source of Knowledge, Knowledge of Mode of Transmission and Curability in Belgaum District of Karnataka state Table 7.2. KNOWLEDGE OF SEXUALLY TRANSMITTED INFECTION

			Male			Female	
Source	90:	Total	Rural	Urban	Total	Rural	Urban
1.	. Percent of Respondents who are Aware of STI	2.2	2.7	0.0	3.0	2.8	3.4
=0	a. Percent Distribution of Respondents by Source						
	of Knowledge Electronic Media	33.3	33.3	*.	65.9	57.8	75.0
	Print Media	33.3	33.3	*.	37.0	31.5	50.0
	Doctors	16.6	16.6	* . * * * * * *	25.9	10.5	62.5
	Health Workers	16.6	16.6		11.1	15.7	0.0
	Others	50.0	50.0	* . * * * * * *	0.0	0.0	0.0
Д	b. Percentage distribution of Respondents by knowledge on Mode of Transmission						
		83.3	83.3	• . • • • • •	55.5	47.3	75.0
	Mother to child	0.0	0.0	*	7.4	0.0	25.0
	Blood Transfusion	0.0	0.0	*	14.8	5.2	37.5
	Others	0.0	0.0	*	11.1	10.5	12.5
	Do not know	16.6	16.6	* . * * * * *	40.7	47.3	25.0
U	c. Percentage distribution of Respondents by knowledge about Curability						
	Curable	50.0	50.0	*	29.6	31.5	25.0
	Not curable	33.3	33.3	*	51.8		62.5
	Do not Know	16.6	16.6		18.5	21.0	12.5
qun,	umber of Respondents	270	218	25	899	029	229

• Percent exceeds 100 due to multiple responses. + Total may not tally because of missing information.

			Male			Female	
925	areness about AIDS	Total	Rural	Urban	Total	Rural	Urban
200	Percent of Respondents who are Aware of HIV	84.4	82.5	92.3	65.0	63.8	68.5
é	Percent Distribution of Respondents by Source			•	-	c	-
	of Anomicage media	0.00	41 1	52 0	12.8	12.0	13.7
	Doctors	, -		. 00	9	, 5	. 8
	Health Workers				4.6		
	Other		60.5		42.0		
à	Percentage distribution of Respondents by						
	5		۳.	75.0	51.6	50.4	
	×	53.5	55.0	47.9	24.9	23.8	28.0
	Mother to child		00	0	11.2	10.7	
	Blood Transfusion			29.1	18.2	17.5	
	Others	0.4	0	0	2.2	1.6	
(25.0	44.4	45.0	
ů	knowledge about Curability						
		5	5				
	cur	73.2	76.6	60.4	2.3	2.1	3.1
	:	1	8				
5	. Percentage distribution of Respondents Aware of Preventions by Type of Measures						
	Use Condom in each sexual intercourse	0					
		-	3				5.
	ck blood prior to transfus						
	Sterilize Needles & Syringes for Injection	6	0				7
	Avoid Pregnancy when having HIV-AIDS Virus	3.0	E -	0.0	2.3	2.1	3.1
	Do not know		0 0				
ė	Percent of						
÷.	About MIV (AIDS) Percentage distribution of Respondents with misconceptions by type	51.7	0.00	31.5	49.7	49.0	51.5
	Shaking Hands	25.	0		20.	80	S.
	Hugging	28.	5		1	8	8
	Kissing	41.	5.	7	4	2	1
	Sharing Cloths	35.	-	9	7	5	-
	Sharing Kitchen Utensils	92	~ a	0 0		6	5
	Mosquito, Flea or Bedbug Bites	46.	50.0	33.3	39.1	38.7	40.1
Number	oer of Respondents	270	218	52	668	670	229

Percent exceeds 100 due to multiple responses.

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100.0 50.0 years 6 above 10 61.53 16.6 83.3 0.0 16.1 Education years 0-96 30.2 62.7 11.6 15.1 543 52.4 Illit. 26.7 69.6 5.3 16.1 56.0 0.0 165 620 * * * * * * * * * * * * * * * * Others Caste 100.0 * * * * * * 0.0 12.9 28.5 108 57 SC/ST 0.0 * * * * * * * 14.3 55.0 23.9 71.8 7.0 * ***** 270 899 Total Government Private Private Others Government Others A. Percent of Respondents who sought treatment a. Percent of Respondents who sought treatment Percent of Respondents who reported at least 2. Percent of Respondents who reported at least Percent distribution of respondents who sought Percent distribution of respondents who sought Total number of female respondents Total number of male respondents Prevalence of RTI and Treatment one symptom of RTI one symptom of RTI treatment by type treatment by type Females Males

Percent of Respondents having RTI Problems and Type of Treatment, Belgaum District of Karnataka

Table 7.4. PREVALENCE OF RTI AMONG MALES AND FEMALES

@ Literate persons with no years of schooling is included here.



